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CONFIRMATION NO. 6543

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/763,295	01/22/2004	514	1616	AL0425KQ10
	RULE			

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/426,329 04/30/2003 PAT 6,723,713  
 which is a CON of 10/050,396 01/16/2002 PAT 6,677,322  
 This application 10/763,295  
 is a CON of 10/053,204 01/16/2002 PAT 6,677,323  
 which is a CON of 09/535,208 03/27/2000 PAT 6,365,581  
 which is a CON of 09/259,721 03/01/1999 PAT 6,057,307  
 which is a CON of 08/911,300 08/14/1997 PAT 5,889,015  
 which is a CON of 08/821,135 03/20/1997 PAT 5,837,699  
 and is a CON of 08/700,664 08/22/1996 ABN  
 which is a CON of 08/444,582 05/19/1995 ABN  
 and said 08/821,135 03/20/1997  
 is a CON of 08/701,536 08/22/1996 ABN  
 and said 08/444,582 05/19/1995  
 is a CON of 08/376,506 01/23/1995 ABN  
 and said 08/701,536 08/22/1996  
 is a CON of 08/376,506 01/23/1995 ABN  
 which is a CIP of 08/188,372 01/27/1994 ABN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/27/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	NJ	1	17	2
Verified and Acknowledged	Examiner's Signature	Initials			

## ADDRESS

24265

## TITLE

USE OF MOMETASONE FUROATE FOR TREATING AIRWAY PASSAGE AND LUNG DISEASES

<b>FILING FEE RECEIVED 770</b>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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